GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:3705
ANSWERED ON:17.04.2002
WHO REPORT ON THE TB DISEASE
GADDE RAMAMOHAN

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether the attention of the Government has been drawn to the latest annual WHO report on the TB disease;

(b) if so, the details of the remarks given in the report in regard to India and its programme for TB disease;

(c) whether the Government are satisfied with the remarks given in the report;

(d) if not, the reasons therefor; and

(e) the further steps taken to cure the TB in rural areas and Below Poverty Line and low income group families?

Answer

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI A. RAJA)

(a): Yes, Sir.

(b): Salient points in regard to TB Control Prgramme in India given in the Report are as under:

1. DOTS coverage in India doubled during 2000, reaching 30% by the end of the year 2000.More than 450 million population had access to DOTS by the end of 2001.

2. The treatment success for the 1999 cohort of new cases was 82%, which is just under the WHO target (85%), mainly because of default rate of 9% which was still high.

3. Treatment success outside DOTS areas is low (21%) because a large fraction of cases are not evaluated.

4. Under RNTCP, it was ensured that effective T.B. Services are maintained throughout the rapid expansion phase, through managerial strengthening and regular monitoring.

5. The challenges facing the RNTCP are to push towards nationawide DOTS coverage, and to improve case finding from the current rate of 50-60% to at least 70% within areas where DOTS is already implemented.To achieve this expansion in case finding, the programme will need to reach out to all clinics, dispensaries and hospitals, including those in the private sector, and to patients who often have poor access to care, including the homeless and immigrants.

6. DOTS expansion is funded through Government Budgets, bilateral donors and World Bank Credit for 2001-2003No budget deficit is foreseen for this period.

7. India is demonstrating how adequate resources can be effectively mobilized and coordinated to the address TB Control.

(c): Yes, Sir. The WHO Report has appreciated the fast expansion of the DOTS strategy in the country and maintenance of effective TB services. The DOTS strategy was adopted as treatment success rate under the conventional programme was low.As against the success rate of below 4 out of 10 under conventional programme, 8 out of every 10 patients put on treatment under revised strategy are being successfully treated. For retrieval of defaulting cases, it has been decided to allow RNTCP Districts to appoint TB Health visitors for every 1.5 lac population in urban areas. To increase the access of the DOTS to the community, it is noted in the report that technical partnership have been established with NGOs, community health volunteers, private sector, ESI and the railways.More than 300 non-governmental organizations are involved in the implementation of RNTCP.To improve case finding, effective IEC activities are being undertaken. Sustainability of existing DOTS services has been ensured through intensive monitoring and supervision and quarterly review meetings at State level.

(d): Does not arise.

(e): RNTCP is being rapidly extended to the whole country.A large part of the expansion upto 460 million population covers rural areas. Efforts are being made to make DOTS Centres more accessible within the community especially in slums and rural areas and to undertaken IEC activities to spread awareness so that more poor people are easily able to avail of RNTCP facilities.It has been

noted in the WHO Report itself that people and communities have been engaged in social mobilization and community participation to promote awareness, use of, and sense of ownership of DOTS Programme.